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Signature: *Linda Roberts-Jackson*

DOCUMENT(S) FAXED: (MARKED WITH X) **13** PAGES ATTACHED

Re Applic of	LLOYD BURRELL, ET AL.
Docket No.	FIS920030011US1
Serial No.	10/605,369
Filing Date	9/25/03
Attorney	Ira D. Blecker

Attached: AMENDMENT, AMENDMENT TRANSMITTAL LETTER

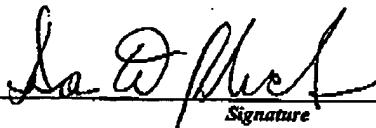
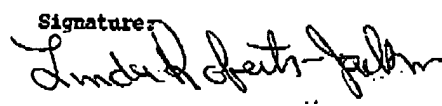
PLEASE DELIVER TO:
EXAMINER: MAI, ANH D.
ART UNIT: 2814
PHONE NO:
FAX NO: 703-872-9306

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Phone: 845-894-2580

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No.	
Applicant(s): Lloyd Burrell, et al.				FIS920030011US1	
Application No. 10/605,369	Filing Date 9/25/03	Examiner MAI, ANH D.	Customer No. 32074	Group Art Unit 2814	Confirmation No. 2368
Invention: SEMICONDUCTOR DEVICE FABRICATION PROCESS THEREFOR					
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14 -	20 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	1 -	2 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 090458 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 Signature			Dated: January 13, 2005		
IRA D. BLECKER, REG. NO. 29,894 2870 ROUTE 52 HOPEWELL JUNCTION, NY 12533			<div style="border: 1px solid black; padding: 5px;">CERTIFICATION OF FACSIMILE TRANSMISSION: I hereby certify that this correspondence is being facsimile transmitted to the USPTO on the date shown below: Date of Transmission: 1/13/05 Name of Person Making Transmission: Linda Roberts-Jackson Signature: </div>		
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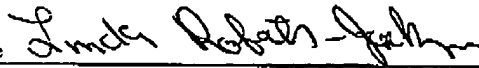
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10/605,369

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I hereby certify that this paper and fee are being TRANSMITTED VIA FACSIMILE TO: Assistant Commissioner for Patents, P. O. Box 1450, ALEXANDRIA, VA 22313-1450. Date of Deposit: 01/13/05 Name of Person Making Deposit: Linda Roberts-Jackson

Signature

**In the United States Patent and Trademark Office**

Date:	1/13/05		
In re Application of:	Lloyd Burrell, et al.	Filed:	9/25/03
For:	SEMICONDUCTOR DEVICE FABRICATION PROCESS THEREFOR		
Serial Number:	10/605,369	Confirmation No. 2368	
Art Unit:	2814	Examiner:	MAI, ANH D.

AMENDMENT

Hon. Commissioner of Patents and Trademarks
P. O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed October 13, 2004, the present application is amended as follows: